

TACTICAL FIELD CARE ACTIONS *continued*

ASSESS CIRCULATION

- **Assess for pelvic fracture**, and if suspected, use a CoTCCC-recommended pelvic compression device
- **Expose wound(s)** and **reassess** any previously applied tourniquets to determine if a tourniquet is indicated
 - If ineffective, tighten further or place and tighten an **additional tourniquet** directly above and next to the deliberate tourniquet
 - If indicated, and time permits, convert the **high and tight tourniquet** to a **deliberate** tourniquet (2–3 inches above the wound)
- If tourniquet was not indicated, convert **high and tight tourniquet and/or junctional tourniquet** to other bleeding control means (wound packing and pressure bandage)
- **Expose** and **reassess any previously placed tourniquets**, clearly mark all tourniquets with the time of tourniquet application
- **Treat any significant nonpulsatile bleeding with hemostatic agent (hold pressure for 3 minutes) and apply a pressure bandage**
- **Reassess junctional (neck, axillary, inguinal) wound(s) packing, if present**
- **Assess for hemorrhagic shock** (checking for radial pulses)
 - If radial pulse is present with normal mental status and significant injuries, insert saline lock (If vascular access is needed but not quickly obtainable via the IV route, use the IO route)
 - If altered mental status in the absence of brain injury and/or weak or absent radial pulse:
 - Establish IV or IO
 - Administer tranexamic acid by slow IV/IO push, as well if the casualty has signs or symptoms of significant TBI or has altered mental status associated with blast injury or blunt trauma
 - Administer blood products, giving 1 gm of calcium after the first unit and continuing reassessment until a palpable radial pulse, improved mental status, or systolic BP of 100 mmHg is present
- **Assess for refractory shock** if not responding to fluid resuscitation and consider untreated tension pneumothorax as possible cause (NDC, if indicated)



NOTIFY TACTICAL LEADER IF CASUALTY REQUIRES EVACUATION
(lines 3, 4, 5 from MEDEVAC request, at a minimum)